

AMERICAN EMBASSY BRAZZAVILLE
APPLICATION FOR EMPLOYMENT
(Please complete in English)

1. Position applied for _____ Announcement Number: _____

2. Full name: _____
(Last) (First) (Middle)

3. Date of Birth: _____ Place of Birth: _____

4. Nationality: _____ Marital status: _____ Sex: _____
☐ Single ☐ Male
☐ Married ☐ Female

5. U.S. CITIZENSHIP: Are you a U.S. Citizen? ☐ Yes ☐ No

6. Present address and telephone number:

Do you have any relatives that work for the U.S. Embassy? Include: father, mother, husband, wife, son, daughter, brother, sister, uncle, aunt, cousin, nephew, niece, half-brother, half-sister, father-in-law, stepmother, stepfather, son-in-law, daughter-in-law, brother-in-law, sister-in-law, etc.

☐ Yes ☐ No

If "yes", write for each of the relatives:

Name	Relationship
_____	_____
_____	_____
_____	_____

7. EDUCATION

NAME OF EDUCATIONAL INSTITUTIONS	DATES ATTENDED From To	TYPE OF DEGREE OR CERTIFICATE	MAJOR SUBJECT
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

8. LANGUAGES (Identify the language level and indicate extent of your competence for each:

ENGLISH:	<u>SPEAK</u>	<u>READ</u>	<u>WRITE</u>	<u>UNDERSTAND</u>
	<input type="checkbox"/> Excellent	<input type="checkbox"/> Excellent	<input type="checkbox"/> Excellent	<input type="checkbox"/> Excellent
	<input type="checkbox"/> Good	<input type="checkbox"/> Good	<input type="checkbox"/> Good	<input type="checkbox"/> Good
	<input type="checkbox"/> Fair	<input type="checkbox"/> Fair	<input type="checkbox"/> Fair	<input type="checkbox"/> Fair
	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> None

FRENCH:**SPEAK****READ****WRITE****UNDERSTAND**☐ Excellent☐ Excellent☐ Excellent☐ Excellent☐ Good☐ Good☐ Good☐ Good☐ Fair☐ Fair☐ Fair☐ Fair☐ None☐ None☐ None☐ None**9. SPECIAL QUALIFICATIONS AND SKILLS****A. COMPUTER SKILLS**

How do you rate your computer skills (please circle):

Excellent

Good

Fair

None

List computer programs in which you have experience:

B. TYPING SPEED: _____ Words per minute: _____

C. OTHER SKILLS (List any other special skills you possess and equipment you can use):

D. TRAINING RECEIVED:

List any training received in areas applicable to the job you are applying for:

10 a. EMPLOYMENT (Start with current and most recent employment)

A. Name and full address of employer:

B. Date of employment: From _____ To _____

C. Exact title of your position: _____

D. Starting salary per month: _____ Final salary/month: _____

E. Name, and Title of immediate supervisor:

F. Description of work

G. Reason for wanting to leave:

10b

A. Name and full address of employer:

B. Date of employment: From _____ To _____

C. Exact title of your position: _____

D. Starting salary per month: _____ Final salary/month: _____

E. Name, and Title of immediate supervisor:

F. Description of work

G. Reason for wanting to leave:

11. REFERENCES

List three competent and responsible persons, not related to you by blood or marriage who are particularly qualified to supply information regarding your character and ability:

	NAME	ADDRESS	TELEPHONE NUMBER	OCCUPATION
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

Have you ever been discharged or forced to resign for misconduct from any position? ☐ Yes ☐ No

Have you ever been discharged from any job ? ☐ Yes ☐ No

Have you ever been arrested or detained by any police or military authority? If so, give place and reason for arrest:

12. YOU MUST SIGN THIS APPLICATION

I certify, to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, complete and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for not hiring me or for firing me after I begin work.

Signature: _____

Date: _____

CONTINUATION SHEET

3. A. Name and full address of employer:

B. Date of employment: From _____ To _____

C. Exact title of your position: _____

D. Starting salary per month: _____ Final salary/month: _____

E. Name, and Title of immediate supervisor:

F. Description of work

G. Reason for wanting to leave:
